

# GENERAL MEDICAL 8.0

## Emergency Preparedness -- 8.4

### Patient-Centered Emergencies--8.4.a

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**Date** December 31, 1998

**Issued:**

**Date Last** March 23, 2011

**Revised:**

**Signature:**



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#### **POLICY**

All appropriate public health staff must be prepared to respond to patient-centered emergencies. Model Emergency Protocols have been developed to assist Regional Offices and Local Health Departments and are to be readily available to all staff.

#### **APPLICABILITY**

This policy applies to all staff providing and/or supporting clinical services in public health regardless of the service delivery setting, i.e., local health department, regional office, home, school, etc.

#### **PURPOSE**

To prepare public health staff and to maintain an acceptable level of preparedness among all staff to respond competently to patient emergencies.

#### **PROCEDURE**

All Regional Health Officers are responsible for ensuring that every Local Health Department and Regional Office staff is informed of emergency procedures and trained to manage patient-centered emergencies.

An unannounced patient emergency drill will be held at least annually with a check-sheet used for evaluation.

All licensed staff will maintain current certification in an approved cardiopulmonary resuscitation (CPR) course. Other health department staff will receive instruction in CPR as determined by each Regional Health Officer. Licensed nursing personnel practice under written protocols when responding to patient-centered emergencies.

A patient-centered emergency will be documented on the appropriate patient record and an Incident-Accident report completed.

Emergency supplies and equipment will be kept in an accessible, easily identifiable location in the clinical setting. Emergencies may involve clients or staff. These kits may be used in situations including, (but not limited to) the following: anaphylaxis, syncope, vasovagal reactions, cardiac arrest, shock, hemorrhage, respiratory distress, and precipitous labor and delivery. Significant use of these kits should be accompanied by notification of emergency medical services to continue care and provide for emergency

The emergency kit and oxygen equipment will be at the site of an emergency within one (1) minute. A system must be in place for inventory of equipment and supplies. The equipment and supplies should be checked monthly and expiring supplies replaced in a timely manner. Clinical staff should be aware of the location and possible use of this equipment.

Each clinical setting will have the appropriate equipment and supplies including, but not limited to:

■ Oxygen supplies and equipment:

- Oxygen tank, with gauge and valve (Check monthly to assure adequate supply)
- Face mask, ventilating, with oxygen inlet port, suitable for adult and pediatric use, with head strap
- Oxygen tubing, tank to mask

■ Personal Protective Equipment

- Goggles
- Masks/shields
- Gloves (no latex, powder free)
- Mouth to mask disposable resuscitative mask
- Gown

■ Pharmaceuticals:

- Aspirin 325 mg tab (At least 5 doses)
- Diphenhydramine (Benadryl) injection 50 mg/ml (at least 2 doses)
- Epinephrine HCl (Adrenaline) Injection 1:1000 (at least 5 doses)

■ Optional Pharmaceuticals: (use governed by locality protocol)

- Ammonia inhalants (ampule or swab)
- Atropine injection. (0.1 mg/ml in 10cc pre-filled syringes) #10
- Diphenhydramine (Benadryl) capsules (25 mg) and liquid (12.5 mg/5cc)

- Glucose (gel tubes, 24 gm or 32 gm tubes) #3
- Glucagon Injection 1 mg
- Supplies
  - Airways, oral: Infant; #3 (small), #4 (medium), #5 (large)
  - Alcohol packets
  - Bandage scissors
  - Blood pressure cuff (pediatric, adult and extra large)
  - Bulbs, irrigation, sterile
  - Cotton swabs
  - Emergency delivery kit (minimum):
    - Cord clamp or tie, sterile
    - Scissors, sterile
    - Baby blanket, x 1 each
    - Kelly clamp
    - Surgical gloves, (non-latex)
  - Flashlight, with extra batteries
  - Gauze pads, sterile, and bandages
  - Stethoscope (pediatric and adult)
  - 50 cc irrigating bulb
  - Syringes, (sterile)
    - 3 cc, with #25 G x 5/8 needle
    - 3 cc, with #23 or #21 G x 1 1/2 inch needle
    - Tuberculin with needle
  - Tape, adhesive, cloth and paper
  - Tongue blades
  - Optional equipment: Glucometer, if used under written locality protocol

## **OFFICE OF PRIMARY RESPONSIBILITY**

Office of the Medical Director, Bureau of Health Services, (615)741-7305